	<p align="center">SOLICITATION AMENDMENT</p> <p>Solicitation Number: <u>RFP YH07-0061</u> Amendment Number One</p>	<p>Arizona Health Care Cost Containment System (AHCCCS) 701 East Jefferson Phoenix, Arizona 85034</p> <p>Sr. Procurement Specialist: Philip M. Baldwin E-mail: Philip.Baldwin@azahcccs.gov</p>
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Page 1 of 3, plus Attachments A and B.

A signed copy of this amendment must be returned with the proposal and received by AHCCCS on or prior to the Solicitation due date and time. This solicitation is amended as follows:

This amendment is to:


1. Change Scope of Work, page 5, Paragraph C Average monthly volume of copayment claims ~~173,000~~ **350,000**.
2. Respond to written questions regarding this RFP.

Offeror hereby acknowledges receipt and understanding of this Solicitation Amendment.		This Solicitation Amendment is hereby executed this 24 day of May 2007, in Phoenix, Arizona.	
Signature	Date	Signature	Date
		May 24, 2007	
Typed Name and Title		Michael Veit	
		Contracts and Purchasing Administrator	
Name of Company			

			AHCCCS Arizona Health Care Cost Containment System 701 East Jefferson, MD 5700 Phoenix, Arizona 85034
	SOLICITATION NO.: YH07-0061	P 2	
		OF 3	

QUESTIONS AND ANSWERS

- Q. Will proposers receive claims level data including NDC's, NABP's, brand/generic identifier and Medicare/Medicaid identifier prior to the due date of the RFP?
- A. AHCCCS will provide you with utilization information which contains the NCD description of the drug and the amount dispensed for a 12 month period. See Attachment A-Dispensing Data posted on the web site.
- Q. Has there been a special retail network set up specifically for this account? Are there any major chains excluded?
- A. Yes to both questions.
- Q. What type of communication materials will be required and how often will they need to be distributed?
- A. There are no specific requirements.
- Q. Will there be any manual eligibility submissions that will be entered by the successful vendor?
- A. Yes
- Q. Can a restricted network be offered?
- A. The network must meet the minimum AHCCCS requirements.
- Q. Please confirm: of the 97,000 Medicare eligible's, 84,000 are also eligible for Medicaid benefits.
- A. Yes the exact number changes continuously.
- Q. Please verify that encounter reporting will not be necessary for the FFS pharmacy program.
- A. Verified.
- Q. What are the top ten utilizing retail pharmacies for the AHCCCS FFS program for 2006?
- A. That information will be posted as Attachment B-Top Ten pharmacy Utilizers.
- Q. Is there a custom formulary for each FFS program listed under this solicitation?
- A. No. Specific formularies are in place for excluded Part D drugs, TRBHA members, and Federal Emergency Services end stage renal disease.

			AHCCCS Arizona Health Care Cost Containment System 701 East Jefferson, MD 5700 Phoenix, Arizona 85034
	SOLICITATION NO.: YH07-0061	P 3	
		OF 3	

Q. Is it a mandatory requirement that 95% of generics dispensed be MAC listed?

A. 95% is the goal.

Q. Is it a mandatory requirement to have a dedicated fax line for clinical prior authorizations for the AHCCCS FFS population?

A. Yes

Q. Please provide the information necessary for the step care therapy protocol on line; is AHCCCS FFS requesting that our internal medical/pharma protocol information be provided, or summary information (i.e. "try generic therapy")?

A. Summary information is acceptable as long as the action necessary by the pharmacy is clear.

Q. I did not see any mention of rebates in this RFP. What is AHCCCS' intention regarding rebates?

A. The RFP does not address rebates. The Offeror may submit a rebate proposal if desired.

Q. Is AZHCCCS processing as secondary for the Medicaid coverage of Duals in Arizona? I believe I heard Del answer in the affirmative to this question but thought I would double check.

A. No. AHCCCS covers excluded Part D drugs and copayments for LIS1 and LIS2 members.

Q. Would you want us to administer a wrap program and if so what would that entail?

A. No.

Q. Would you want us to create and manage a wrap formulary?

A. No.

Q. Is AZHCCCS considering a Medicare MAPD Special Needs Plan?

A. No